Make YOUR Impact

United Way of Union County

www.unitedwayofunioncounty.org

Join our mission to bring neighbors and resources together to improve lives in Union County.

2009-10 United Way of Union County Pledge Form

○ Mr. ○ Mrs. ○ Ms. ○ Dr. First Name _____ Last Name _____

Home Address _____ City _____ Zip Code _____

E-mail Address (So we may acknowledge receipt of your gift and update you on how it's being spent.) _____ Today's Date _____

Employer _____

_____
Signature (Required for payroll deductions and credit card pledges)

○ I wish to remain anonymous. ○ Send me information about volunteer opportunities.

Pillar Society

Membership in United Way's exclusive Pillar Society begins at just $500. More than 260 members are already a part of Union County's Leadership Giving circle.

- *Platinum Pillar* $2,500 +
- *Gold Pillar* $1,000 - $2,499
- *Silver Pillar* $750 - $999
- *Bronze Pillar* $500 - $749

OTHER GIVING SUGGESTIONS

- *1% of your annual pay*
- *The Fair Share*
  Equals 1/hr pay/month
- *The Standard - $160*
  This is the average gift to United Way
- *The Insider - $100*
  Receive the Community Care Card Coupon Card and the quarterly Contributor newsletter.
- *The Buck-a-Week Club*
  Equals $52

How will you make your impact? (Choose one of the options below)

No gift is too large or too small. They all matter. They all make a difference. Especially yours.
We can't do our work without YOUR help. Suggested giving levels are to the left. Please give generously.

○ EASY PAYROLL DEDUCTION

○ $50 ○ $25 ○ $20
○ $10 ○ $5 ○ Other $ _____

Per pay for _____ pay periods for an annual amount of: $_____

○ AUTOMATIC WITHDRAWL - (Please send voided check with completed pledge form.)

I authorize United Way of Union County to debit my checking account the following amount on the 5th day of every month in 2010:

○ $50 ○ $25 ○ $20
○ $10 ○ $5 ○ Other $ _____

Per month (x 12) for an annual amount of: $_____

○ CHARGE MY CREDIT CARD ○ MasterCard ○ Visa ○ American Express $_____

Account Number _____ Expiration Date _____

○ ONE-TIME GIFT ○ Cash ○ Check Check No: _____ $_____

○ BILLED PLEDGE United Way will bill me quarterly in 2010 for my pledge of: $_____

(Optional Section) Where do you want to make your impact?

○ In the areas that need it most. United Way will leverage my dollars to make an even greater impact in my community.

OR

Designate my gift to the following Impact Area (Investments must be $50 or more to designate)

○ Emergency & Basic Needs ○ Health & Human Services ○ Senior Services ○ Youth Services

OR

○ United Way agency of your choice: _____

(Must be $50 or more and directed to a United Way Member Agency or a United Way in another community to be processed. 85 cents of all donor designated gifts go directly to programming, exceeding the Better Business Bureau's standard of 65 cents or more.)

THANK YOU for your gift to United Way of Union County! No goods or services were provided in exchange for this contribution. Please keep a copy of this form for your tax records. You will also need a copy of your pay stub, W-2, or other employer document showing the amount withheld and paid to a charitable organization. Consult your tax advisor for more information.